

REMARKS/ARGUMENTS

In response to the Office Action mailed June 10, 2004, Applicants propose to amend their application and request reconsideration in view of the proposed amendments and the following remarks. In this amendment, no claims have been cancelled without prejudice, no claims have been added and claims 1, 6, 19, and 24 are amended so that claims 1, 5, 6 and 19-24 are currently pending. No new matter has been introduced.

Claim 24 was rejected under 35 U.S.C. § 101. Claim 24 has been amended in accordance with the Examiner's suggestion of alternate language. Accordingly, reconsideration and withdrawal of the rejection is respectfully requested.

Claim 19 was rejected under 35 U.S.C. § 112, second paragraph. Applicants have amended Claim 19 to correct the deficiency.

Claims 1, 6, 19-22 and 24 were rejected as being anticipated by U.S. Patent Number 6,645,242 to Quinn (Quinn). This rejection is respectfully traversed.

Anticipation exists only if all of the elements of the claimed invention are present in a system or method disclosed, expressly or inherently, in a single prior art reference. Therefore, if it can be shown that there is one difference between the claimed invention and what is disclosed in the single reference, there can be no anticipation.

Quinn discloses a bifurcated side access intravascular stent graft. The stent graft comprises primary stent segments and primary graft sleeve. This main fluid channel includes an internal graft channel that is in fluid communication with a secondary stent graft. The internal graft channel is formed by a partition within the main fluid channel.

The present invention as claimed in amended claim 1 is directed to a bypass system that comprises a first prosthesis comprising a conduit formed from a stent and graft material,

a compressible gasket mounted in one end of the conduit and at least one second prosthesis. The second prosthesis is secured within an end of the first prosthesis by the compressible gasket. Quinn fails to disclose an end to end connection as set forth in amended Claim 1. Quinn also fails to disclose a separate compressible gasket. Quinn does disclose a side opening for the placement of a second stent graft within an internal channel formed by a partition. Accordingly, reconsideration and withdrawal of the system is respectfully requested.

Claims 1, 5, 6 and 19-24 were rejected as being anticipated by U.S. Patent No. 6,554,858 to Dereume et al. (Dereume). This rejection is respectfully traversed.

Dereume discloses an intraluminal prosthesis. The intraluminal prosthesis comprises a tubular trunk that is divided into several axial channels. The several axial channels are adapted to receive stent grafts.

Dereume fails to disclose a bypass system comprising a first prosthesis, a compressible gasket positioned inside of the conduit of the first prosthesis and around its perimeter, and at least one second prosthesis. The single compressible gasket provides for a fluid tight seal while maintaining a single flow channel within the first prosthesis. Since Dereume fails to disclose or suggest the compressible gasket feature, there can be no anticipation. Accordingly, reconsideration and withdrawal of the rejection is respectfully requested.


Claims 1, 5, 6, 19, 21, 22 and 24 were rejected as being anticipated by U.S. Patent No. 5,843,160 to Rhodes (Rhodes). This rejection is respectfully traversed.

Rhodes fails to disclose a compressible gasket seal that maintains a single fluid flow channel. Accordingly, reconsideration and withdrawal of the rejection is respectfully traversed.

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The amendment raises no new issues and places the application in condition for allowance. Therefore, entry is proper and earnestly solicited.

Respectfully submitted,



Carl J. Evens
Attorney for Applicant
Reg. No. 33,874

Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003
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732-524-2518